L180000094311

(Requestor's Name)
(Address)
(Address)
	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	Business Entity Name)
	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





700311044697

04/02/18--01035--016 +∗125.00

18 APR -2 AH 9: 22

D O'KEEFF APR 0 6 2018 March 27, 2018

Department of State New Filing Section Division of Corporations P. O Box 6327 Tallahassee, Florida 32314

Re: R & L SPEECH SERVICE LLC

To whom it may concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation. $\angle \angle \angle$

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

MARIA ELENA GONGORA

MELISSA QUIROS
Notary Public - State of Florida
Commission # FF 938163
My Comm. Expires Nov 22, 2019
Bonded through National Notary Assin

LLAHASSEE, FI

8 APR -2 AM 9:



COVER LETTER

	ew Filing Section vision of Corporations
eun iret	R & L SPEECH SERVICE LLC
SUBJECT	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	MARIA E RUIZ
	Name of Person
	L & M ACCOUNTING SERVICES INC
	Firm/Company
	7750 SW 117TH AVE SUITE 201D
	Address
	MIAMI FLORIDA 33183
	City/State and Zip Code MARIAQUIROS9@HOTMAIL.COM
	E-mail address: (to be used for future annual report notification)
For further i	nformation concerning this matter, please call:
	at ()
	Name of Person Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:
\$125.00 F	S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

R & L SPEECH SEE				
(Must cont	ain the words "Limited Lia	ability Company, "L.	L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the principal offi	ice of the Limited Lia	bility Company is:	
<u>Princip</u>	al Office Address:		Mailing Address:	
13425 SW 66 TERRACE		7750 SV	V 117TH AVE SUITE 201D	
	MIAMI FLORIDA 33183		FLORIDA 33183	
(The Limited Liability Company	ent, Registered Office, & cannot serve as its own R	egistered Agent. You	Signature: I must designate an individual o	
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an a	ent, Registered Office, & cannot serve as its own R active Florida registration.	egistered Agent. You)	Signature: I must designate an individual o	
The Limited Liability Company another business entity with an	ent, Registered Office, & cannot serve as its own R active Florida registration.	egistered Agent. You) gent are:	Signature: I must designate an individual o	
The Limited Liability Company another business entity with an	ent, Registered Office, & cannot serve as its own R active Florida registration. address of the registered a MARIA ELENA GON	egistered Agent. You) gent are:	Signature: i must designate an individual o	
(The Limited Liability Company another business entity with an	ent, Registered Office, & cannot serve as its own R active Florida registration. address of the registered a MARIA ELENA GON	egistered Agent, You) gent are: IGORA Name	Signature: I must designate an individual o	
(The Limited Liability Company another business entity with an	ent, Registered Office, & cannot serve as its own R active Florida registration. address of the registered a MARIA ELENA GON	egistered Agent, You) gent are: IGORA Name	ı must designate an individual o	
(The Limited Liability Company another business entity with an	ent, Registered Office, & cannot serve as its own R active Florida registration. address of the registered a MARIA ELENA GON	egistered Agent, You) gent are: IGORA Name	ı must designate an individual o	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)



"MGR" = Manager MGR	MARIA ELENA GONGORA 13425 SW 66 TERRACE MIAMI FLORIDA 33183
MGR	13425 SW 66 TERRACE
	MIAMI FLORIDA 33183
.	
 	
ate of filing.)	cannot be more than five business days prior to or 90 day oplicable statutory filing requirements, this date will not be
REQUIRED SIGNATURE:	
me (in	
This document is executed in according a management of the second of the	an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes. ion submitted in a document to the Department of State s provided for in s.817.155, F.S.
Signature of a member or a This document is executed in according a make that any false informationstitutes a third degree felony as	ordance with section 605.0203 (1) (b), Florida Statutes. ion submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)

18 APR -2 AH 9: 23

